## **Application Data Sheet**

Application Information	App	lication	Inform	ation
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Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: COMPOSITE CHROMIUM PLATING FILM

AND SLIDING MEMBER HAVING THE
SAME AND ITS PRODUCTION METHOD

Attorney Docket Number:: OSHIMI1

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 6

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Takeo

Middle Name::

Family Name:: OSHIMI

Name Suffix::

City of Residence:: Kashiwazaki-shi

State or Province of Residence:: Niigata-ken

Country of Residence:: Japan

Street of Mailing Address:: c/o Kashiwazaki Plant, Kabushiki Kaisha

Riken, 1-37, Hokutocho

City of Mailing Address:: Kashiwazaki-shi

State or Province of Mailing Address:: Niigata-ken

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Kiyotaka

Middle Name::

Family Name:: OKU

Name Suffix::

City of Residence:: Kashiwazaki-shi

State or Province of Residence:: Niigata-ken

Country of Residence:: Japan

Street of Mailing Address:: c/o Kashiwazaki Plant, Kabushiki Kaisha

Riken, 1-37, Hokutocho

City of Mailing Address:: Kashiwazaki-shi

State or Province of Mailing Address:: Niigata-ken

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Katsumi

Middle Name::

Family Name::

TAKIGUCHI

Name Suffix::

City of Residence::

Kashiwazaki-shi

State or Province of Residence::

Niigata-ken

Country of Residence::

Japan

Street of Mailing Address::

c/o Kashiwazaki Plant, Kabushiki Kaisha

Riken, 1-37, Hokutocho

City of Mailing Address::

Kashiwazaki-shi

State or Province of Mailing Address::

Niigata-ken

Country of Mailing Address::

Japan

Postal or Zip Code of Mailing Address::

**Correspondence Information** 

Correspondence Customer Number::

001444

Representative Information

Representative Customer Number::

001444

**Domestic Priority Information** 

Application::

**Continuity Type::** 

Parent

Parent Filing

Application::

Date::

This Application

National Stage of

PCT/JP05/001277

01-28-05

Foreign Priority Information

Country::

Application Number::

Filing Date::

**Priority Claimed::** 

Japan

2004-023889

01-30-04

Yes

**Assignment Information** 

Assignee Name::

Kabushiki Kaisha Riken

Street of Mailing Address::

13-5, Kudankita 1-chome

City of Mailing Address::

Chiyoda-ku

State or Province of Mailing Address::

Tokyo

Country of Mailing Address::

Japan

Postal or Zip Code of Mailing Address::